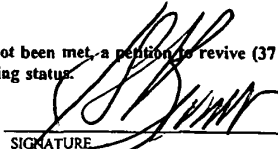


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JG19 Rec'd PCT/PTO 26 FEB 2002

U.S. APPLICATION NO. 10/069507 INTERNATIONAL APPLICATION NO. PCT/FR 00/02413		ATTORNEY'S DOCKET NUMBER 1712934																					
21. <input checked="" type="checkbox"/> The following fees are submitted: BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)): Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO and International Search Report not prepared by the EPO or JPO. \$1040.00 International preliminary examination fee (37 CFR 1.482) not paid to USPTO but International Search Report prepared by the EPO or JPO \$890.00 International preliminary examination fee (37 CFR 1.482) not paid to USPTO but international search fee (37 CFR 1.445(a)(2)) paid to USPTO \$740.00 International preliminary examination fee (37 CFR 1.482) paid to USPTO but all claims did not satisfy provisions of PCT Article 33(1)-(4) \$710.00 International preliminary examination fee (37 CFR 1.482) paid to USPTO and all claims satisfied provisions of PCT Article 33(1)-(4) \$100.00 ENTER APPROPRIATE BASIC FEE AMOUNT =		CALCULATIONS PTO USE ONLY <div style="border: 1px solid black; height: 100px; width: 100%;"></div>																					
Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)).		\$	890																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">CLAIMS</th> <th style="width: 25%;">NUMBER FILED</th> <th style="width: 25%;">NUMBER EXTRA</th> <th style="width: 25%;">RATE</th> </tr> </thead> <tbody> <tr> <td>Total claims</td> <td>17 - 20 =</td> <td>0</td> <td>x \$18.00</td> </tr> <tr> <td>Independent claims</td> <td>1 - 3 =</td> <td>0</td> <td>x \$84.00</td> </tr> <tr> <td colspan="3">MULTIPLE DEPENDENT CLAIM(S) (if applicable)</td> <td>+ \$280.00</td> </tr> <tr> <td colspan="3">TOTAL OF ABOVE CALCULATIONS</td> <td>=</td> </tr> </tbody> </table>		CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	Total claims	17 - 20 =	0	x \$18.00	Independent claims	1 - 3 =	0	x \$84.00	MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$280.00	TOTAL OF ABOVE CALCULATIONS			=	\$	130
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE																				
Total claims	17 - 20 =	0	x \$18.00																				
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MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$280.00																				
TOTAL OF ABOVE CALCULATIONS			=																				
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.																							
SUBTOTAL =		\$	1020																				
Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).		\$	130																				
TOTAL NATIONAL FEE =		\$	1,150																				
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property +		\$																					
TOTAL FEES ENCLOSED =		\$	1,150																				
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>		Amount to be refunded:	\$																				
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>		charged:	\$																				
a. <input checked="" type="checkbox"/> A check in the amount of \$ <u>1,150</u> to cover the above fees is enclosed. b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed. c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>50-0305</u> . A duplicate copy of this sheet is enclosed. d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.																							
NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the application to pending status.																							
SEND ALL CORRESPONDENCE TO: Robert J. Schneider Chapman and Cutler 111 West Monroe Street Chicago, Illinois 60603 (312) 845-3919																							
SIGNATURE  NAME Jane S. Berman REGISTRATION NUMBER 43,494																							

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JC19 Rec J PCT/PTO 26 FEB 2002

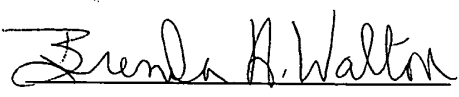
EXPRESS MAIL CERTIFICATE

Express Mail Label Number: EK 288 571 650 US

Date of Deposit: February 26, 2002

I hereby certify that the attached documents are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated above and is addressed Commissioner for Patents, Box PCT, Washington, D.C. 20231.

Brenda A. Walton
(Typed or printed name of person
mailing paper or fee)


(Signature of person mailing paper
or fee)